

ATTORNEY'S NAME	Ron Peterson
CLIENT/MATTER NO.	45232-10020
FIRM ACCOUNT NO.	

CITY Newark,
STATE NJ

BUSINESS MEALS:						
Description	Dates	3/31/2008				
Breakfast						
Lunch						
Dinner						
Other						
TOTAL						

*Business meal expenses recapped on the top half of the form are to be referenced to the detail on the bottom half of the form.

[illegible]

Total Business Meals -- To Reverse Side - Must Agree with (B)
(Attach Additional Sheet If Necessary)

Jenner & Block LLP

TRAVEL/BUSINESS MEAL EXPENSE REIMBURSEMENT FORM
(See Side B for Business Meals) --- (Side A)

☐ Cash
☒ Check

PAY TO Ron Peterson

OFFICE: ☒ Chicago (01) ☐ Washington (02) ☐ Dallas (05) ☐ New York (08)
FACILITY: Number _____ Department _____ Name _____

Travel Expenses of Ron Peterson
to New York New York State
From: _____ To: _____

Firm Account No: _____
Client/Matter Name: Alcan Aluminum shpaes
Client Matter No.: 45232-10306

Submitted by: _____ Signature _____ Date _____
Approved by: _____ Signature _____ Date _____

Purpose of Travel: Attend Creditors' Committee Meeting

TRAVEL EXPENSES		Date	>	4/7/2008				Total
Description								
Lodging (Room Rate Including Tax)								
Telephone				1.00				1.00
Other - Please Specify "in the comment area"				1,469.87				1,469.87
Air or rail transportation				39.00				39.00
LOCAL TRANSPORTATION				28.00				28.00
Taxi								
Taxi								
Taxi								
Taxi								
Taxi				22.22				22.22
# of Miles 0.505 Mileage allowance for use of own car								
Car rental								30.00
Parking								1,590.09
TOTAL TRAVEL EXPENSES								

Comments:		Amount	ACCOUNTING USE:	TRAVEL EXPENSE (A) \$	Disbursement Recap
1	Tolls	\$1.00	Firm Account No.	BUSINESS MEALS (B) \$	1,590.09
2				TOTAL \$	1,590.09
3				LESS TRAVEL ADVANCE \$	
4				NET AMOUNT TO BE PAID \$	1,590.09
5					

LOCATION WHERE EXPENSES WERE INCURRED:	
CITY	New York
STATE	New York

BUSINESS MEALS:						
Description	Dates	4/7/2008				
Breakfast						
Lunch						
Dinner						
Other						
TOTAL						

On the top half of the form are to be referenced to the detail on the bottom half of the form.

Ref.*	Amount	Date	Firm or Company (If Appropriate)		Business Purpose of Meal
			Individuals (include self)		
TOTAL					

**Total Business Meals – To Reverse Side - Must Agree with (B)
(Attach Additional Sheet If Necessary)**